



POTENTIAL HAZARDOUS WASTE SITE
TENTATIVE DISPOSITION

REGION

SITE NUMBER

II

NJ 000002500

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME

Solvents Recovery Service of NJ

B. STREET

C. CITY

LINDEN

D. STATE

New Jersey

E. ZIP CODE

II. TENTATIVE DISPOSITION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK 'X'	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED -- NO HAZARD	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C. REMEDIAL ACTION NEEDED (If yes, complete Section IV.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
D. ENFORCEMENT ACTION NEEDED (if yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

E. RATIONALE FOR DISPOSITION

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION
(mo., day, & yr.)

G. IF A CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE THE
ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED
(mo., day, & yr.)

H. PREPARER INFORMATION

1. NAME

Richard RAMON

2. TELEPHONE NUMBER

(212)-264-1573

3. DATE (mo., day, & yr.)

4-9-80

III. INVESTIGATIVE ACTIVITY NEEDED

A. IDENTIFY ADDITIONAL INFORMATION NEEDED TO ACHIEVE A FINAL DISPOSITION.

B. PROPOSED INVESTIGATIVE ACTIVITY (Detailed Information)

1. METHOD FOR OBTAINING NEEDED ADDITIONAL INFO.	2. SCHEDULED DATE OF ACTION (mo., day, & yr)	3. TO BE PERFORMED BY (EPA, Con- tractor, State, etc.)	4. ESTIMATED MANHOURS	5. REMARKS
a. TYPE OF SITE INSPECTION				
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____
(3) _____	_____	_____	_____	_____
b. TYPE OF MONITORING				
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____
c. TYPE OF SAMPLING				
(1) _____	_____	_____	_____	_____
(2) _____	_____	_____	_____	_____

248719



III. INVESTIGATIVE ACTIVITY NEEDED and PART B - PROPOSED INVESTIGATIVE ACTIVITY (Continued)

1. TYPE OF LAB ANALYSIS				
2. OTHER (specify)				
3. OTHER (specify)				

C. ELABORATE ON ANY OF THE INFORMATION PROVIDED IN PART B (on front & above) AS NEEDED TO IDENTIFY ADDITIONAL INVESTIGATIVE WORK.

D. ESTIMATED MANHOURS BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES	1. ACTION AGENCY	2. TOTAL ESTIMATED MANHOURS FOR INVESTIGATIVE ACTIVITIES
a. EPA		b. STATE	
c. EPA CONTRACTOR		d. OTHER (specify)	

IV. REMEDIAL ACTIONS

A. SHORT TERM/EMERGENCY STRATEGY (On Site & Off-Site): List all emergency actions needed to bring site under immediate control, e.g., restrict access, provide alternate water supply, etc. See instructions for a list of Key Words for each of the actions to be used in the space below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

B. LONG TERM STRATEGY (On Site & Off-Site): List all long term solutions, e.g., excavation, removal, ground water monitoring wells, etc. See instructions for a list of Key Words for each of the actions to be used in the spaces below.

1. ACTION	2. EST. START DATE (mo, day, & yr)	3. EST. END DATE (mo, day, & yr)	4. ACTION AGENCY (EPA, State, Private Party)	5. ESTIMATED COST	6. SPECIFY 311 OR OTHER ACTION; INDICATE THE MAGNITUDE OF THE WORK REQUIRED
				\$	
				\$	
				\$	
				\$	
				\$	
				\$	

C. ESTIMATED MANHOURS AND COST BY ACTION AGENCY

1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES	1. ACTION AGENCY	2. TOTAL EST. MANHOURS FOR REMEDIAL ACTIVITIES	3. TOTAL EST. COST FOR REMEDIAL ACTIVITIES
a. EPA			b. STATE		
c. PRIVATE PARTIES			d. OTHER (specify)		

POTENTIAL HAZARDOUS WASTE SITE FINAL STRATEGY DETERMINATION

REGION II	SITE NUMBER W 000002500 W 000002500
---------------------	---

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

A. SITE NAME Solvents Recovery Service of New Jersey	B. STREET 1200 SYLVAN STREET
C. CITY Linden	D. STATE New Jersey
E. ZIP CODE	

II. FINAL DETERMINATION

Indicate the recommended action(s) and agency(ies) that should be involved by marking 'X' in the appropriate boxes.

RECOMMENDATION	MARK "X"	ACTION AGENCY			
		EPA	STATE	LOCAL	PRIVATE
A. NO ACTION NEEDED	X				
B. REMEDIAL ACTION NEEDED, BUT NO RESOURCES AVAILABLE <i>(If yes, complete Section III.)</i>					
C. REMEDIAL ACTION <i>(If yes, complete Section IV.)</i>					
D. ENFORCEMENT ACTION <i>(If yes, specify in Part E whether the case will be primarily managed by the EPA or the State and what type of enforcement action is anticipated.)</i>					
E. RATIONALE FOR FINAL STRATEGY DETERMINATION					

F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY THE DATE PREPARED (mo., day, & yr.)

G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE DATE FILED (mo., day, & yr.)

II. PREPARER INFORMATION

1. NAME

2. TELEPHONE NUMBER

3. DATE (mo., day, & yr.)

III. REMEDIAL ACTIONS TO BE TAKEN WHEN RESOURCES BECOME AVAILABLE

List all remedial actions, such as excavation, removal, etc. to be taken as soon as resources become available. See instructions for a list of Key Words for each of the actions to be used in the spaces below. Provide an estimate of the approximate cost of the remedy.

A. REMEDIAL ACTION	B. ESTIMATED COST	C. REMARKS
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
D. TOTAL ESTIMATED COST	\$	

Solmets Recovery Service of New Jersey
Linden

200 SYLVAN STREET
New Jersey

ZIP CODE

II. TREATMENT ACTION

Indicate the recommended action(s) and agency(ies) that should be taken by checking "X" in the appropriate boxes.

RECOMMENDATION

ACTION AGENCY

A. NO ACTION NEEDED - NO HAZARD

B. INVESTIGATIVE ACTION(S) NEEDED (If yes, complete Section III)

C. REMEDIAL ACTION NEEDED (If yes, complete Section IV)

D. IMMEDIATE ACTION NEEDED (If yes, specify in Part II whether the case will be primarily managed by the EPA or the State and what type of agreement action is anticipated)

E. NATIONALITY FOR DISPOSITION

No Ultimate Disposal on Site

F. INDICATE THE ESTIMATED DATE OF FINAL DISPOSITION (month, day, year)

G. IF CASE DEVELOPMENT PLAN IS NECESSARY, INDICATE ESTIMATED DATE ON WHICH THE PLAN WILL BE DEVELOPED (month, day, year)

H. PROJECT LEAD CONTACT

NAME

Richard R. T. T. T.

I. TELEPHONE NUMBER

(212)-264-1573

J. DATE (month, day, year)

1-18-80

III. INVESTIGATIVE ACTIVITY NEEDED

INDICATE ADDITIONAL INFORMATION REQUIRED TO ACHIEVE A FINAL DISPOSITION.

1. PROPOSED INVESTIGATIVE ACTIVITY (Need for information)

1. PROPOSED INVESTIGATIVE ACTIVITY (Need for information)	2. SOURCE OF DATA ACTION (month, day, year)	3. TO BE PERFORMED BY EPA OR STATE (month, day, year)	4. DATE OF COMPLETION (month, day, year)	5. REMARKS
1.1. INITIAL INVESTIGATION				
1.2. FIELD SURVEY				
1.3. LABORATORY ANALYSIS				
1.4. OTHER INVESTIGATIVE ACTIVITY				
1.5. FIELD MONITORING				
1.6. OTHER INVESTIGATIVE ACTIVITY				
1.7. FIELD MONITORING				
1.8. OTHER INVESTIGATIVE ACTIVITY				
1.9. FIELD MONITORING				
1.10. OTHER INVESTIGATIVE ACTIVITY				
1.11. FIELD MONITORING				
1.12. OTHER INVESTIGATIVE ACTIVITY				
1.13. FIELD MONITORING				
1.14. OTHER INVESTIGATIVE ACTIVITY				
1.15. FIELD MONITORING				
1.16. OTHER INVESTIGATIVE ACTIVITY				
1.17. FIELD MONITORING				
1.18. OTHER INVESTIGATIVE ACTIVITY				
1.19. FIELD MONITORING				
1.20. OTHER INVESTIGATIVE ACTIVITY				

Continue On Page 2

Solvents Recovery Service of
New Jersey
1200 Sylvan Street
Linden, New Jersey
December 12, 1979

BACKGROUND

Solvents Recovery Service of New Jersey came to EPA's attention through the Eckhardt report. The Eckhardt report stated that this facility accepted 7,300 tons of chemical waste from 1950 to 1979.

The facility was inspected on December 12, 1979 by Randy Braun, Physical Scientist, Frank Coyle and Joe Chabak, of the Surveillance and Analysis Division. Facility representatives interviewed included James R. Hulm, Vice President, and Carleton H. Boll, Pres.

NATURE OF MATERIALS DISPOSED OF AT THE SITE

Solvents Recovery Service of New Jersey is not a chemical waste disposal site. The Eckhardt report figures stating the firm accepted 7,300 tons of chemical waste from 1950 to 1979 are low. The facility is a reprocessing facility, not an ultimate disposal facility. The facility accepts various spent solvents, in either drums or tank trucks, and refines them back into resaleable products. The sludge from the refining processes are high enough in BTU value, according to Mr. Boll, to be sold as fuel to industries such as the cement industry.

The drummed solvents on the site appeared to be stored properly with no leakage observed.

The facility does not ultimately dispose of any waste by landfill, incineration or lagooning on site.

DESCRIPTION OF SITE

A site plan is appended as Figure 1. The facility owns approximately ten acres most of which is developed.

No liquid pools, spills, or surface runoff were observed.

No photographs were taken of the facility.

The facility is in a highly industrial, urban area. The number of residents and workers that could be exposed to the solvents is high.

HAZARD ASSESSMENT

The subject facility reprocesses mineral spirits, toluene, xylene, ketones, and methanol. The smell of solvent downwind in the immediate vicinity of the plant is strong. There may be a health hazard risk to local residents and workers in the immediate vicinity of the plant from the solvent vapors.

The possibility exists for ground water pollution and surface water contamination especially from spillage. The facility has had a history of spills (November 1974 - 400 gallon spillage of xylol, April 1975 - chemical spillage of unknown amount, May 1975 - 100 gallon spillage of solvent). The facility was fined by EPA on September 25, 1978 for failure to prepare an SPCC Plan.

This facility has various air pollution permits and a NPDES permit. The NPDES permit is associated with steam condensate, hot well discharges, wash water and floor drainage via Discharge 001 and storm water runoff via Discharge 002. A NPDES survey conducted in July 1978 found the facility in non-compliance with the permit's only enforceable limitation (pH) and with the failure to submit required reports on time.

Based upon the site investigation, this facility should receive a low priority designation.

● FIGURE 1

SOLVENTS RECOVERY SERVICE

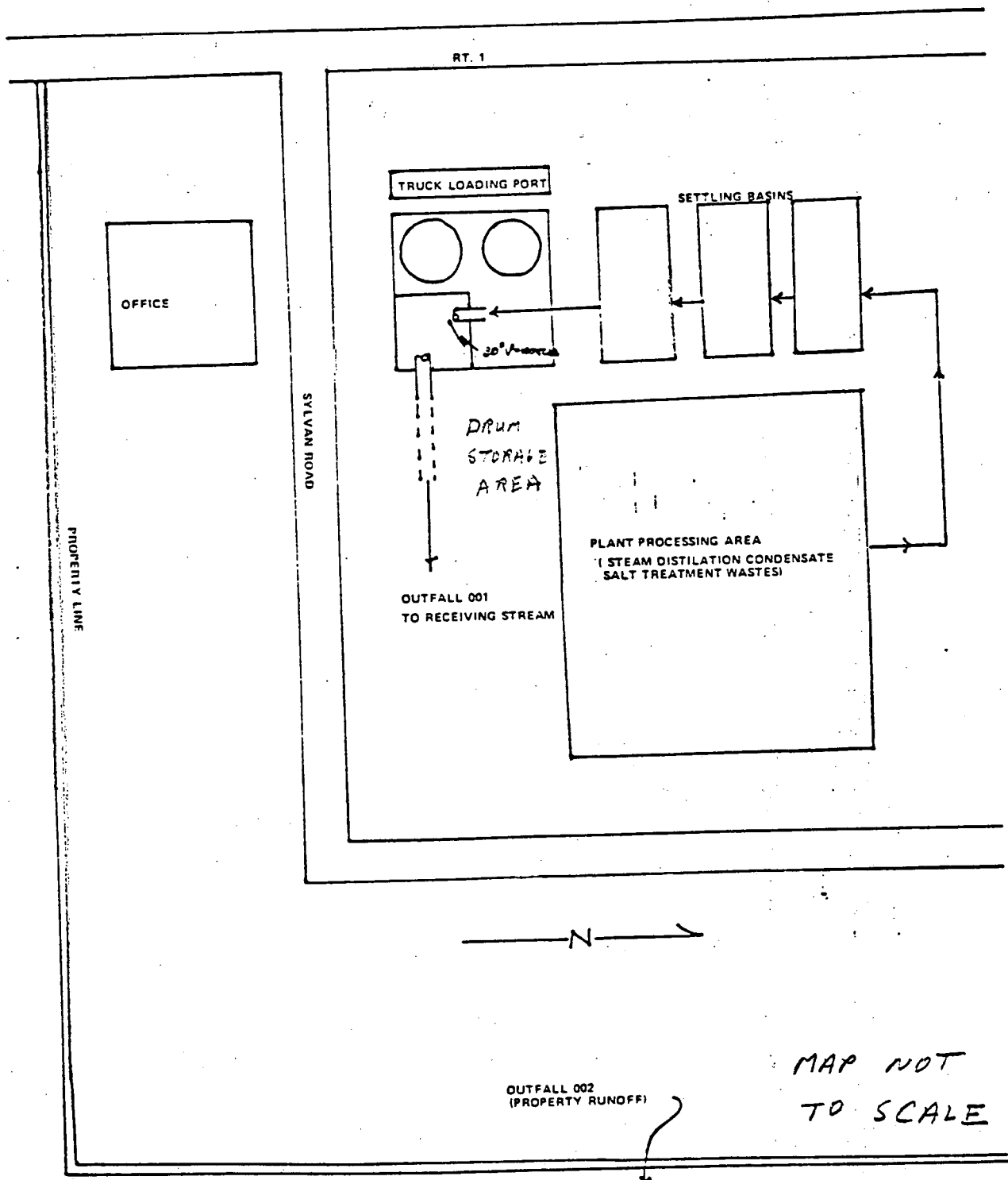


FIGURE 1

SOLVENTS RECOVERY SERVICE

